## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FIB ADDRESS" for maintenance fee notifications.

02/16/2012 21302 7590

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(Dupositor's name)	ert Z. Evora
(Signature)	ert Z. Evora/
(Date)	ruary 21, 2012

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE MBL1067 9235 09/902,965 07/11/2001 Steven B. Dunn TITLE OF INVENTION: BOTTLE RACK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1740	\$0	\$0	\$1740	05/16/2012
EXAM	MINER	ART UNIT	CLASS-SUBCLASS			
GRAVINI, STEI	PHEN MICHAEL	3744	034-104000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (I) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printing.		Robert	Z. Evora
					John L	.John L. Knoble
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		p to			3	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assigner recordation as set forth in 37 CFR 3.11. Completion of this form is N	ee data will appear on the patent. If an assignee is identified below, the document has been filed fo fOT a substitute for filing an assignment.					
(A) NAME OF ASSIGNEE	IAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Please check the appropriate assignee category or categories (will not be	printed on the patent):					
4a. The following fee(s) are submitted:	4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)					
Issue Fee	A check is enclosed.					
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies	The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above)						
Applicant claims SMALL ENTITY status See 37 CFR 1.27.	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					

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